PTO/SB/31 (04-05)

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т	NOTICE OF APPEAL FROM THE EXAMINER TO HE BOARD OF PATENT APPEALS AND INTERFER		Docket Number (Optional) 54084-62559			
	certify that this correspondence has been electronically filed USPTO via the EFS Web on		n re Application of Scheller et al.			
Odober 14, 2008		Application Number Filed				
Signature Dough M. Roliniki		10/586,018			7/14/2006	
Typed o	or printed	For: Surgical Instrument Handle with Adjustable Actuator Position				
name Joseph M. Rolnicki					Examiner Chen, Victoria W.	
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.						
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))				\$ <u>540.00</u>		
	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:					
	A check in the amount of the fee is enclosed.					
	Payment by credit card. Form PTO-2038 is attached.					
	The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.					
☒	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 20-0823					
	A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.					
	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
I am the ☐ applicant/inventor. ☐ Signature						
	applicant/inventor.	-	Yosysh "	Ŋ. K. Sig	nature	
	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	_			M. Rolnicki printed name	
\boxtimes	attorney or agent of record.		C.	314) 5	552-6286	
	Registration number 32653 Telephone Number					
	attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34.				er 14, 2008 Date	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						

^{*}Total of 1 forms are submitted.

This collection of information is required by 37 CFR 41.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11, 1.14 and 41.6. This collection is estimated to take 12 minutes to complete, including

including repairing, and submitting the completed application from to the USPTO. Time will vary depending upon the individual case Avy comments on the applications, properly and provided to complete the form another. US Patient and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 2313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner of Patients, P.O. Box 1450, Alexandria, VA 2313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner of Patients, P.O. Box 1450, Alexandria, VA 2313-1450.